

MARYLAND TRAUMA PHYSICIAN SERVICES FUND

Physician Information Bulletin #4

NEWS & NOTES

APPLICATION REVIEW WORKSHOPS PLANNED

This is an opportunity for applicants to bring partially or completed Uncompensated Care and On-call applications for MHCC staff review and guidance.

SUBURBAN HOSPITAL
The Atrium, 2nd floor
April 22nd, 1 – 3pm

MHCC Public Meeting
Room in Baltimore
April 26th, 1 – 3pm

ROBINWOOD MEDICAL
CENTER, Room 122
April 28th, 1 – 3pm



◆MHCC to award auditing contract in March 2004 for uncompensated care and on-call application audits to begin in June.

◆**Uncompensated Care & On-Call applications** for services provided between October 1, 2003 & March 31, 2004 can be submitted between April 1st and April 31st.

◆Maryland **Medicaid** paid the first Maryland Trauma Physician Services Fund claim in January.

◆**MVA** collected approximately \$6.1 million for the Fund as of February.



For More Information

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MHCC Policy Guidance

MHCC Policy Guidance

Payment for Services to Patients Readmitted to the Hospital

- ◆ The Maryland Trauma Physician Fund (Fund) will reimburse trauma physicians for services provided to a trauma patient with a valid Maryland Institute for Emergency Medical Services System (MIEMSS) *Trauma Registry Number* and correct supporting documentation in the registry. To be eligible for reimbursement, the trauma physician must provide services during the period from the initial start of service to the end of service or discharge date recorded on the MIEMSS Trauma Registry. Services provided during subsequent readmissions to the hospital or for services provided in an office setting are not eligible for elevated trauma fund payment.

The Fund will reimburse for services provided to a patient due to an unplanned readmission to the hospital, if the patient's readmission is within 72 hours after the end of the original trauma discharge. In most cases, the return visit is due to an undiagnosed injury.

MHCC has been informed that some Trauma Centers assign new trauma numbers to patients that are readmitted for treatment either within 72 hours or thereafter. MHCC recommends assigning the same trauma center number when care is provided to the same patient for injuries related to a single event. The Fund will not pay for services if the admission does not fall within the 72-hour window, regardless of whether an existing or new trauma number is assigned.

EXAMPLE: A man without health insurance is thrown into the windshield in an automobile collision. The individual is examined and released from a trauma center. Thirty-six hours after his release, the individual is readmitted with a subdural hematoma. A neurosurgeon removes the clot. The neurosurgeon is eligible for payment because the readmission falls within the 72-hour readmission window.

QUESTION: How will MHCC apply the 72-hour rule?

ANSWER: The MHCC will use the MIEMSS trauma registry readmission information to determine eligibility. If the trauma case is flagged as a readmission, time from readmission will be calculated and a case that falls under the 72-hour rule will be paid.